

Meeting the Staffing Needs and Needs of Staff during Pandemic

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Staffing Needs

Recent planning scenarios suggest:

30-50% of U.S. will be infected

30-60 million seeking medical care

1.8 million U.S. hospital admits

300,000 need ICU (50-100% of beds)

Source: President's Council of Advisors on Science & Technology (8/7/2009)



Staffing Needs

Recent planning scenarios suggest:

30,000 – 90,000 deaths

Most deaths – children, young adults

Highest risk:

Pregnancy, Neurological,
Respiratory impairment, Diabetes,
severe Obesity

Staffing Needs

Recent planning scenarios suggest:

Vaccine availability will miss the projected start of the H1N1 resurgence (mid Sept) by a month

Staffing Needs

Risk to those under 24 is 4-5 times that of 25-49 y/o and 20 times that of 65+ y/o

School, daycare closures likely

Parents will Stay Home

Staffing Needs

With upwards of 30% of workforce absent during peak, keeping those present healthy (physically and mentally) is crucial.

Prioritize Worker Safety!

Good Communication!

Resilience

Adapting well in face of adversity, trauma, tragedy, threats, or significant sources of stress.

bouncing back

Behaviors, thoughts, actions can be learned

Source: American Psychological Association



Keys to Personal Resilience

Support (personal, social, organization)

Able to plan and take action

Positive/optimistic view of self

Self-confidence, self-efficacy

Communication, problem solving skills

Emotional control

Steps to Personal Resilience

1. Stay well (sleep, eat, exercise)
2. Accept help, support from others
3. Limit exposure to negative media
4. Be confident that things will improve
5. Do something. Take action
6. Trust your ability, instincts
7. Be flexible

Keys to Organization Resilience

Communication and knowledge sharing

Trust and credibility

Adequate resources and know-how

Internal and external social networks

Plans for individual, organization responses

Steps to Organization Resilience

1. Cross-train for redundancy
2. Teach self-protection, ahead of need
3. Encourage personal contingency plan
4. Test surge capacity plans
5. Provide mental health support
6. Engage employees in problem solving
7. Communicate, communicate, comm ...

Meeting Staff Needs

HCWs are accustomed to caring for the sick and injured. Heavy workloads. Stressful situations.

Few have experienced prolonged surges.

Not all work with contagious illnesses.

Meeting Staff Needs

Non-HCW staff often have little experience working with contagions.

May not be prioritized for vaccines.

May not have emotional resilience, reserve.

Meeting Staff Needs

Internal resources –

On-staff Mental Health providers

Flexible shifting

Emergency Childcare

Sick Pay

Human Resources

Risk Communication

Meeting Staff Needs

External resources –

Mental Health providers (ex., KPA.org)

Medical Reserve Corps / Psych First Aid

National, State Hotlines

Certified Childcare Facilities

Local, State Health Dept.

Colleges & Universities Counseling

Meeting Staff Needs

Initially, HCWs may respond to surge with:

Excitement

Enthusiasm

Empathy and compassion

Willingness to work longer hours

Nervousness

Concern

Meeting Staff Needs

Compassion Fatigue (aka, burnout, vicarious traumatization, secondary traumatic stress) may occur.

Signs include: Hopelessness; Loss of experiencing pleasure; Constant stress and anxiety; Pervasive negative attitude

Meeting Staff Needs

Compassion Fatigue may result in:

Loss of productivity

Inability to focus

New feelings of incompetence, self doubt

Substance abuse or misuse

Loss of “desire to care for others”

Meeting Staff Needs

If **Compassion Fatigue** is suspected, intervention on behalf of the individual is needed.

If untreated, may become similar to **PTSD**

Seek Professional Help

Enough from us ...

Let's Talk